U.S. Department of Labor
Office of Labor-Management
Standards
Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E WS DROP	
1. File Number U - 028657	
Or as O O O Strange	2. Fiscal Year Covered From:
77.26	1 / 1 / 04 Through: 12 / 31 / 04
Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Mark J. Lohan	Name District Council #35
	Labor Organization File Number 028657
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 25 Colgate Rd.	Street 25 Colgate Rd.
City Roslindale	City Roslindale
State MA ZIP Code + 4 02131-1123	State MA ZIP Code + 4 \$\partial 2131 - 1123
5. Position in labor organization. Organizer	ΨΖΙΙΙΙΙ
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclu A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	Sions det form in the insudctions;:
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City	
State ZIP Code + 4	
	nature
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true correct, and complete. (See the section on penalties in the instructions.)	

Signed

On

(617) 522-0520

Telephone Number

Name of Person Filing Mark J. Lohan	
	File Number U- 028657
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actionally any part of which consists of buying from or selling or leasing directly or incomplete the policy of the dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent or
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name D.C. #35 Joint Training Program Trust	
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any Suite 221	X b. Trust
Street 25 Colgate Rd.	c. Employer
City Roslindale	
State MA ZIP Code + 4 02131-1123	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Springfield Technical Community College
Trade Name, if any:	annual fund raiser.
P.O. Box, Bidg., Room No., if any	
Street	
City Table 18 Care and the control of the control o	11.b. Approximate dollar value of such dealing.
City City	
State ZIP Code + 4	12.a. Nature of interest held or income received.
The second secon	
State ZIP Code + 4	12.a. Nature of interest held or income received.
State ZIP Code + 4 C. Received from any employee (4)	12.a. Nature of interest held or income received. 12.b. Amount.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	12.a. Nature of interest held or income received. 12.b. Amount.
State ZIP Code + 4 C. Received from any employee (4)	12.a. Nature of interest held or income received. 12.b. Amount.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of mone) 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of mone) 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of mone. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of mone) 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	12.a. Nature of interest held or income received. 12.b. Amount. er parts A and B above) or other thing of value.



District Council 35

IUPAT, AFL-CIO 25 Colgate Road Roslindale, MA 02131



Serving Maine, Massachusetts, New Hampshire, Rhode Island and Vermont

Boston Office

Phone: 617-522-0520 Fax: 617-524-0716

Springfield Office 413-733-3961

Maine

207-439-2704

New Hampshire 603-227-0799

Vermont 802-766-4113

Representing

- Protective and Decorative Coatings Applicators
 - · Wallcoverers ·
 - Drywall Finishers
 - Painters •
 - Decorators •
 - · Glaziers ·
- Architectural Metal & Glass Workers
 - · Scenic Artists ·
 - Designers •
- Civil Service Workers •
- · Shipyard Workers ·
- Maintenance Workers
 - Building Cleaners •
 - Metal Polishers •
 - Metalizers •
 - Public Employees •
 - · Clerical Workers ·
- · Professional Employees ·
 - Security Guards •
 - · Safety Engineers ·
 - Bridge Painters
 - Riggers •
 - Tank Painters •
 - Marine Painters •
- · Containment Workers ·
 - Waterblasters
- Vacuum Cleaners
 - Sign Painters
- Sign & Display Workers
 - Bill Posters •
- Convention & Show Decorators & Builders
 - · Paint Makers ·
 - Sandblasters
- Lead Abatement Workers •
- Floorlaying & Decorative Coverings Workers •
- Journeymen & Apprentice Commercial, Industrial, Highway, Residential Construction Workers

Ralph Harriman

Secretary - Treasurer - General Business Manager

To:

Whom It May Concern

Date: 8/11/2005

From:

Mark J. Loha

DISCLAIMER

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing, or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will file an amended Form LM-30.

€ GCIŪ© 109